

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR MEDICARE & MEDICAID SERVICESFORM APPROVED  
OMB NO. 0938-039145<sup>th</sup> 12/09/12

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  44A114	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED  10/23/2012
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NAME OF PROVIDER OR SUPPLIER

LAKESHORE HEARTLAND

STREET ADDRESS, CITY, STATE, ZIP CODE

3025 FERNBROOK LANE  
NASHVILLE, TN 37214

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
K 018 SS=E	<p><b>NFPA 101 LIFE SAFETY CODE STANDARD</b></p> <p>Doors protecting corridor openings in other than required enclosures of vertical openings, exits, or hazardous areas are substantial doors, such as those constructed of 1<math>\frac{1}{4}</math> inch solid-bonded core wood, or capable of resisting fire for at least 20 minutes. Doors in sprinklered buildings are only required to resist the passage of smoke. There is no impediment to the closing of the doors. Doors are provided with a means suitable for keeping the door closed. Dutch doors meeting 19.3.6.3.6 are permitted. 19.3.6.3</p> <p>Roller latches are prohibited by CMS regulations in all health care facilities.</p> <p>This STANDARD is not met as evidenced by: Based on observations, it was determined the facility failed to protect corridors with solid-bonded core doors.</p> <p>The findings included:</p> <p>On 10/22/12 at 8:00 PM, observation within resident room 320 revealed there were three (3) quarter-inch (1/4") diameter through penetrations on the closing side of the entry door.</p> <p>This finding was acknowledged by the Administrator and verified by the Maintenance</p>	K 018	<ol style="list-style-type: none"> <li>On 10/23/12, the 3 holes penetrating resident room 320 door were sealed/repared by the Maintenance Assistant.</li> <li>On 10/23/12, all doors were inspected by the Maintenance Assistant with no other deficiencies found.</li> <li>All doors will be inspected monthly by the Maintenance Assistant to ensure compliance.</li> <li>The monthly inspections by the Maintenance Assistant will be audited by the Environmental Services Director until no problems are found with the inspections for 3 consecutive months.</li> </ol>	11/16/2012

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

*Judith French*

TITLE

*Administrator*

(X6) DATE

11/08/12

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See Instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

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OMB NO. 0938-0391

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K 018	Continued From page 1	K 018		
K 067 SS=E	<p>Director during the exit interview on 10/22/12.</p> <p><b>NFPA 101 LIFE SAFETY CODE STANDARD</b></p> <p>Heating, ventilating, and air conditioning comply with the provisions of section 9.2 and are installed in accordance with the manufacturer's specifications. 19.5.2.1, 9.2, NFPA 90A, 19.5.2.2</p> <p>This STANDARD is not met as evidenced by: Based on observations and testing, it was determined the facility failed to maintain the Heating, Ventilation, and the Air-Conditioning (HVAC) system.</p> <p>The findings included:</p> <p>On 10/22/12 at 7:45 PM, testing of the exhaust fans in the administrators office area, 2nd floor South Wing resident rooms, and the 3rd floor shower room revealed the exhaust fans were not working.</p> <p>These findings were acknowledged by the Administrator and verified by the Maintenance Director during the exit interview on 10/22/12.</p>	K 067	<ol style="list-style-type: none"> <li>On 10/24/12, repairs to the exhaust fan in question were completed by an outside contractor.</li> <li>On 10/25/12, all exhaust vents and fans were inspected by the Maintenance Assistant and Director of Environmental Services with no other deficiencies found.</li> <li>All exhaust fans and vents will be inspected monthly by the Maintenance Assistant to ensure compliance.</li> <li>The monthly inspections by the Maintenance Assistant will be audited by the Environmental Services Director until no problems are found with the inspections for 3 consecutive months.</li> </ol>	11/16/2012
K 147 SS=E	<p><b>NFPA 101 LIFE SAFETY CODE STANDARD</b></p> <p>Electrical wiring and equipment is in accordance with NFPA 70, National Electrical Code. 9.1.2</p>	K 147		

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K 147	<p>Continued From page 2</p> <p>This STANDARD is not met as evidenced by: Based on observations, it was determined the facility failed to maintain the electrical system.</p> <p>The findings included:</p> <p>On 10/22/12 at 10:00 PM, observation within the corridor ceiling located on the first floor next to the dietary side door revealed there was an electrical junction box without any cover plate to it.</p> <p>This finding was acknowledged by the Administrator and verified by the Maintenance Director during the exit interview on 10/22/12.</p>	K 147	<ol style="list-style-type: none"> <li>On 10/23/12, the junction box cover plate in question was replaced with a proper cover plate by the Maintenance Assistant.</li> <li>On 10/23/12, all junction boxes above the ceiling were inspected for missing or improper covers by the Maintenance Assistant and Director of Environmental Services with no other deficiencies found.</li> <li>All junction boxes will be inspected monthly by the Maintenance Assistant to ensure compliance.</li> <li>The monthly inspections by the Maintenance Assistant will be audited by the Environmental Services Director until no problems are found with the inspections for 3 consecutive months.</li> </ol>	11/16/2012